

## **Employment Services**

**Definition:** Employment Services consist of intensive, on-going supports that enable individuals for whom competitive employment at or above minimum wage is unlikely absent the provision of supports and who, because of their disabilities, need supports to perform in a regular work setting. Employment Services may include services to assist the individual to locate a job or develop a job on behalf of the individual. Employment Services are conducted in a variety of settings, particularly work sites where persons without disabilities are employed and include activities needed to sustain paid work. Employment Services may be provided in group settings, such as mobile work crews on enclaves, or in community-based individual job placements.

### **Models**

Employment Services consist of three distinct models: Enclave, Mobile Work Crew, and Individual Community Placement:

1. **Enclave** – A small group of people (usually 8 or less) with developmental disabilities, who work under the supervision of an employee of the provider agency, in a community business/industry along side non-disabled employees to produce goods or services controlled by the community business/industry (ex. janitorial services at a specific business/industry etc.). The contractual relationship is between the business/industry and the provider agency, whereby the provider agency then pays the individual.  
**Note:** One unit = ½ day
2. **Mobile Work Crew** – A small group of people (usually 8 or less) with developmental disabilities, who work under the supervision of an employee of the provider agency, as a self-contained business who typically move to different work sites, by selling a service (ex. landscaping, janitorial) to purchasers within the community excluding provider agencies. The contractual relationship is between the business/industry and the provider agency, whereby the provider agency then pays the individual.  
**Note:** One unit = ½ day
3. **Individual Community Placement** – Assessment, job development, placement, and training involve direct facilitation and instruction by DDSN job coach staff. Individual community placement provides support in; community based instruction, career awareness, skills acquisition, strategic on the job training, long term support and follow-along. Ongoing supports and identification of long term natural supports are imperative for the person with significant disabilities to participate in competitive employment and to ensure job stabilization without support throughout the tenure of the placement.  
**Note:** One unit = 1 hour

**Provider:** Employment Services are provided by DSN Boards or companies/agencies qualified by SCDDSN to provide Employment Services. When Employment Services are provided through a Mobile Crew or Enclave model, the services must originate from a facility licensed by SCDDSN as a Day Facility.

**Arranging for the Service:** For those who are determined to need the kind of assistance described in the Employment Services definition, their Plan must clearly reflect the need for the service. The individual should be given a choice of providers of this service and the offering of choice must be documented. The individual and/or his/her legal guardian should be provided with a listing of enrolled providers. If there is only one available choice then this must be explained to the individual and/or his/her legal guardian and documented.

**Note:** No Vocational Rehabilitation sign-off required.

For Employment Services, one unit equals one hour of service. Prior to adding Employment Services to the Waiver Tracking System, you must first ensure the service is added on the STS. If Employment Services are not already on the STS, you cannot add it to the Waiver Tracking System. Once you have ensured that the information is entered correctly onto the STS you may proceed with adding the services to the Waiver Tracking System.

Once the request is approved, Employment Services can be authorized using either the **Authorization for Services (Community Supports Form ES-06)** for Individual Placement or **Authorization for Services (Community Supports Form ES-07)** for Group Placement

**Monitoring the Services:** You must monitor the effectiveness, frequency, duration, benefits, and usefulness of the service along with the individual's/family's satisfaction with the service. Information gathered during monitoring may lead to a change in the service, such as an increase/decrease in units authorized, change of provider, change to a more appropriate service, etc. The following criteria should be followed when monitoring Employment Services.

Monitorship of this service should occur with the individual/family and the service provider:

- At least monthly for the first two months
- At least quarterly thereafter
- Start over with each new provider or job site location

Some items to consider during monitorship include:

- Where does the individual work?
- What type of work is the individual doing?
- What are their work hours?
- Do they want more hours or less?
- What is the Job Coach doing (specifically) for this individual?
- Is the Job Coach effective with assistance and training?
- How often does the individual see the Job Coach?
- Do they like where they work or do they wish to make a change?
- What are their job responsibilities? Are they too much for the individual? Do they want more responsibilities?
- How are they doing on the job? Are they accomplishing their job duties? Is the employer pleased with their work performance?
- How much income do they generate?
- Is transportation a problem?
- Are they on time to work?
- Is the individual satisfied with his/her current employment? Has his/her employment status changed since your last contact?
- Does the individual feel that he/she is receiving the amount of support needed at the worksite?
- Is the amount of services being received reviewed and changed, as the individual's needs change?
- Is the individual satisfied with the provider of services? Does the individual feel that the provider shows them courtesy and respect when delivering the service?

**Reduction, Suspension, or Termination of Services:** If services are to be reduced, suspended, or terminated, a written notice must be forwarded to the individual or his/her legal guardian including the details regarding the change(s) in service, allowance for appeal/reconsideration, and a ten (10) calendar day waiting period before proceeding with the reduction, suspension, or termination of the waiver service(s). The general termination form that has been used in the past for all waiver services is no longer used. See **Chapter 8** for specific details and procedures regarding written notification and the appeals process.

## AUTHORIZATION FOR SERVICES TO BE *BILLED TO DSN BOARD*

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**Individual's Name**

1

### Date of Birth

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**Address**

**Medicaid #**

## Employment Services

☐ Assessment \_\_\_\_\_ (number of units)

## Individual Placement

Number of Units Per Year: \_\_\_\_\_ (1 unit = 1 hour)

Signature of Person Authorizing Services

Date \_\_\_\_\_

Billing Name/Address\_\_\_\_\_

**AUTHORIZATION FOR SERVICES  
TO BE BILLED TO DSN BOARD**